## CJA 21 AUTHORIZATION AND VOUCHER FOR EXPERT AND OTHER SERVICES

		CJA 21 AUTHOR	GZATION AND	YOUCI	IEK FUK	EAPERTAD	ID OTHER 3E	RVICES		
1. CIR/DIST/DIV. CODE CUX 2. PERSON REPRESENTED Zheng, Xu Ping					VOUCHER NUMBER					
3. MAG. DKT/DEF. NUMBER 1:08-000011-001		4. DIST, DKT/DEF, NUMBER		5. APPEALS DKT/DEF. NU			MBER	6. OTI	IER DKT. NUMBER	
7. IN CASE/MATTER OF (Case Name)		8. PAYMENT CATEGORY		9. TY	9. TYPE PERSON REPRESEN			D 10. REPRESENTATION TYPE (See Instructions)		
U.S. v. Zheng		Misdemeanor		Adult Defendant			nt	Criminal Case		
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section). If more than one offense, list (up to five) major offenses charged, according to severity of offense.  1) 8 1325.M IMPROPER ENTRY BY ALIEN										
			vakiraterini)	(49. (11)	N. P. Collection	stati met	\$4( i s. 💎			
12. ATTORNEY'S STATEMEN As the attorney for the person re		imed above. I hereby affir	m that the services re	ennested ar	o necessary	for arlequate rem	escutation Thereby	r nemest:	han an in in is as an	
Authorization to obtain the service Approval of services already obtain	e Estimated Comp	ensation: \$		OR	•			•	ices in excess of \$500)	
Signature of Attorney						Dat				
Panel Attorney	Retained Atty	_Pro-Se = _Legal Organ	uzation			LMI	С			
Attorney's name (First nam	e, Middle initial. La	st name, including soffix)	and mailing addre	e55.						
						, ,				
13. DESCRIPTION OF AND JUSTIFICATION FOR SERVICES (See instructions)  14. TYPE OF SERVICE PROVIDER										
					01   Investigator   20   Legal Analyst/Consultant   02   Jury Consultant   21   Jury Consultant   21   Jury Consultant   Midporton Specialist					
					04 1	Psychologist Psychiatrist	23 .	Duplica	ion Specialist ation Services (See Instructions)	
15. Court Order						05   Polygraph Examiner 24 Other (specify)				
Financial eligibility of the person represented having been established to the court's satisfaction, the suthorization requested in Item 12 is hereby granted.					07   Fingerprint Aualyst     08 - Accountant     09   CALR (Westlaw/Lexis,etc)					
					10 _ 0	hemist/Toxico Ballistics Experi	logist			
Signature of Presiding Judicial Officer or By Order of the Court					13 Weapons/Firearms/Explosive Expert 14 Pathologist/Medical Examiner					
Date of Order		Nunc Pro Tunc Da	le .		16 📑 🔻	Other Medical I Voice/Audio An	alyst			
Repayment or partial repayment ordered from the person represented for this service at time of author					ion. 18 2. Computer (Hardware/Software/Systems)					
T YES NO					19 F	Paralegal Servic	es	·········		
16. SERVICES AND EXPENSES				MATII/TECHNICAL ADDITIONAL						
(Attach itemization of services and expenses with da a. Compensation		ates) AMOUNT		CLAIN			ADJUSTED AMOUNT		REVIEW	
b. Travel Expenses (lodging,	narking meals	mileage etc )				_		<del></del>		
c. Other Expenses		_	<del></del>	-		$-\!\!\!+$				
17. PAYEE'S NAME (First Nar			fiv and MAH IN	VC ADD	PESS		•			
177 171 2 D O 171 D (1 113) 1741		me, melading any sair	najana Marish	IG ADD	CLZI.					
TIN: Telephone Number:										
CLAIMANT'S CERTIFICATION FOR PERIOD OF SERVICE FROM										
	m is for services rer	dered and is correct, and I	lat I have not sought	For receive	d payment (c	compensation or	anything of value) i	from any other	er source for these services.	
Signature of Claimant/Payee:	TORNEY: IL	ereby cartify that the	cativinas wata ran	dered for	this case	Date:	•		<del></del>	
	ORULI. III	creby certify that the	services were rem	Mered 101	mis case.					
Signature of Attorney:				-	Р	Date:				
19. TOTAL COMPENSATION		20. TRAVEL EXPENSES			21. OTHER EXPENSES			S 22. TOT. AMT APPROVED/CERTIFIED		
						<b>200</b> 200 200 200 200 200 200 200 200 200				
23. Either the cost (excluding exp							Id not any 2 ==	anthonal or to the	······································	
<ul> <li>Prior authorization was not ob even though the cost (excludir</li> </ul>			mus that timely proc	mement of	urese necess	any services cou	ла поглачан риог а	amorization,		
Signature of Presiding Judicia	l Officer	<u> </u>	Da	ite			Judge/Mag. Jud	ige Code		
24. TOTAL COMPENSATION		25. TRAVEL EXPENSES			26. OTHER EXPENSES			27. TOTAL AMOUNT APPROVED		
28. PAYMENT APPROVED IN EXCESS OF THE STATUTORY THRESHOLD UNDER 18 U.S.C. 3006A(e)(3)										
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